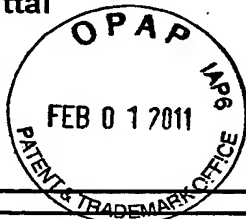


**Request For  
Continued Examination (RCE)  
Transmittal**

Address to:  
Mail Stop RCE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450



|                        |                      |
|------------------------|----------------------|
| Application Number     | 10/717,500           |
| Filing Date            | November 21, 2003    |
| First Named Inventor   | Joseph Chappell      |
| Group Art Unit         | 1638                 |
| Examiner Name          | Russell Kallis       |
| Customer Number        | 77202                |
| Attorney Docket Number | 3800066.00086 / 205E |

This is a Request for Continued Examination (RCE) under 37 C.F.R. §1.114 of the above-identified application.

**1. Submission required under 37 C.F.R. §1.114**

- a. ☐ Previously submitted
- i. ☐ Consider the amendment/reply under 37 C.F.R. 1.116 previously filed on \_\_\_\_\_
- ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on \_\_\_\_\_
- iii. ☐ Other \_\_\_\_\_

**b. ☒ Enclosed**

- i. ☒ Amendment/Reply (6 pages);
- ii. ☐ Affidavit(s)/Declaration(s);
- iii. ☐ Information Disclosure Statement; and
- iv. ☒ Other: Return Postcard.

**2. Miscellaneous**

- a. ☐ Suspension of action on the above-identified application is requested under 37 C.F.R. §1.103(c) for a period of \_\_\_\_\_ months. (Period of suspension shall not exceed 3 months; Fee under 37 C.F.R. §1.17(i) required)
- b. ☐ Other \_\_\_\_\_

**3. Fee The RCE fee under 37 C.F.R. §1.17(e) is required by 37 C.F.R. §1.114 when the RCE is filed.**

- a. ☒ The Director is hereby authorized to charge the fees set forth below, and any other fees that may be due in connection with this and the attached papers or with this application during its entire pendency, or to credit any overpayments, to Deposit Account No. 02-1818. A duplicate of this sheet is enclosed.
- i. ☒ RCE fee required under 37 CFR 1.17(e) - \$405.00
- ii. ☒ Extension of time fee (37 CFR 1.136 and 1.17) - \$1,175.00
- iii. ☒ Other Any deficiencies
- b. ☐ Check in the amount of \$\_\_\_\_\_ enclosed
- c. ☐ Payment by credit card (Form PTO-2038 enclosed)

**SIGNATURE OF APPLICANT, ATTORNEY OR AGENT REQUIRED**

|                   |                   |                                   |                  |
|-------------------|-------------------|-----------------------------------|------------------|
| Name (Print/Type) | Stephanie Seidman | Registration No. (Attorney/Agent) | 33,779           |
| Signature         |                   | Date                              | February 1, 2011 |

**CERTIFICATE OF MAILING BY "EXPRESS MAIL"**

I hereby certify that this paper and any attached papers are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" under "Express Mail" Mailing Label Number EM 315355649 US in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

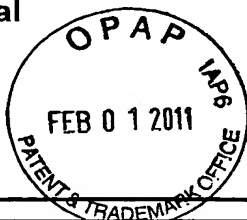
|                   |               |      |                  |
|-------------------|---------------|------|------------------|
| Name (Print/Type) |               | Date | February 1, 2011 |
| Signature         | Jonathan Witt |      |                  |

02/03/2011 CCHAU1 00000027 021818 10717500  
01 FC:2801 405.00 DA

02/03/2011 CCHAU1 00000027 021818 10717500  
02 FC:2255 1175.00 DA

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| Name (Print/Type) |               | Date | February 1, 2011 |
| Signature         | Jonathan Witt | Date | February 1, 2011 |